

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number: LX00083															
In re Application of	Guo, Jin																
Application Number	09/814,663	Filed March 22, 2001															
For	Keypad Layout For Alphabetic Symbol Input																
Group Art Unit	2635	Examiner Wong, Albert Kang															
<p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above-identified application.</p> <p>The requested extension and appropriate non-small-entity fee are as follows: (Check time period desired):</p> <table style="margin-left: auto; margin-right: auto; border-collapse: collapse;"> <tr><td style="border: 1px solid black; padding: 2px;"><input checked="" type="checkbox"/></td><td style="padding: 2px;">One Month (37 CFR 1.17(a)(1))</td><td style="padding: 2px;">\$ 120.00</td></tr> <tr><td style="border: 1px solid black; padding: 2px;"><input type="checkbox"/></td><td style="padding: 2px;">Two Months (37 CFR 1.17(a)(2))</td><td style="padding: 2px;">\$ 450.00</td></tr> <tr><td style="border: 1px solid black; padding: 2px;"><input type="checkbox"/></td><td style="padding: 2px;">Three Months (37 CFR 1.17(a)(3))</td><td style="padding: 2px;">\$ 1020.00</td></tr> <tr><td style="border: 1px solid black; padding: 2px;"><input type="checkbox"/></td><td style="padding: 2px;">Four Months (37 CFR 1.17(a)(4))</td><td style="padding: 2px;">\$ 1590.00</td></tr> <tr><td style="border: 1px solid black; padding: 2px;"><input type="checkbox"/></td><td style="padding: 2px;">Five Months (37 CFR 1.17(a)(5))</td><td style="padding: 2px;">\$ 2160.00</td></tr> </table> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the amount shown above is reduced by one-half, and the resulting fee is \$ _____</p> <p><input type="checkbox"/> A check in the amount of the fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p><input checked="" type="checkbox"/> The Commissioner has already been authorized to charge fees in this application to a Deposit Account.</p> <p><input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required or credit any overpayment to Deposit Account Number 502117 Deposit Account Name: Motorola, Inc.</p> <p><input type="checkbox"/> I have enclosed a duplicate copy of this sheet.</p> <p>I am the:</p> <p><input type="checkbox"/> Applicant/inventor</p> <p><input type="checkbox"/> Assignee of record of the entire interest. See 37 CFR 3.71.</p> <p><input checked="" type="checkbox"/> Attorney or agent of record (Registration No.: 37,465)</p> <p><input type="checkbox"/> Attorney or agent under 37 CFR 1.34(a) Registration number if acting under 37 CFR 1.34(a) _____</p>			<input checked="" type="checkbox"/>	One Month (37 CFR 1.17(a)(1))	\$ 120.00	<input type="checkbox"/>	Two Months (37 CFR 1.17(a)(2))	\$ 450.00	<input type="checkbox"/>	Three Months (37 CFR 1.17(a)(3))	\$ 1020.00	<input type="checkbox"/>	Four Months (37 CFR 1.17(a)(4))	\$ 1590.00	<input type="checkbox"/>	Five Months (37 CFR 1.17(a)(5))	\$ 2160.00
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December 28, 2004		Date															
		Signature															
		Hisashi D. Watanabe															
		Type or printed name															
<p>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.</p> <p><input checked="" type="checkbox"/> Total of <u>1</u> form(s) are submitted</p>																	
CERTIFICATE OF MAILING																	
<p>I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first-class mail in an envelope addressed to: Mail Stop RCE, Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450, or facsimile transmitted to the U. S. Patent and Trademark Office on this date: <u>Dec. 28, 2004</u></p>																	
Typed or printed name	Hisashi D. Watanabe																
Signature																	